

Request for Contract Audit Services

**Attn: Director of Technical Services
Office of Inspector General**

**Phone No.: 202-927-5460
Fax No.: 202-927-5367**

1. Bureau and Office:		2. Date: / /	
3a. Requested By:		3b. Title:	
4a. Contact Person:		4b. Phone No.: Fax No.:	
5a. Name of Contractor:		5b. Solicitation/Contract No.:	
5c. Contractor Contact:		5d. Phone No.: Fax No.:	
5e. Address of Contractor:			
6. Number of Subcontractor(s): (Complete TD F 70-06.10a)			
7a. Type of Contract:		7b. Contract Amount:	
7c. Contract Description:		7d. Period of Performance:	
8. Location of Contractor's Accounting Records:			
9. Type of Audit Service: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> a. Proposal Review <input type="checkbox"/> b. Incurred Cost/Close Out <input type="checkbox"/> </div> <div style="margin-top: 5px;"> c. Other (Specify) <input type="checkbox"/> </div>			
10. Type of Contract Action: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> a. New <input type="checkbox"/> b. Option <input type="checkbox"/> </div> <div style="margin-top: 5px;"> c. Modification <input type="checkbox"/> </div>		11. Requested Completion Date: / /	
12. Requestor's Mailing Address for Receipt of Acknowledgement and Audit Report:			
13. Attach Copy of Contractor/Subcontractor Proposal, Claim and/or Technical Report.			
14. Cognizant Audit Office:			
15. Special Instructions:			

Instructions

1. Enter the name of the bureau and office requesting the contract audit services.
2. Enter the date of the request for contract audit services.
- 3a. Enter the name of the person requesting the contract audit services.
- 3b. Enter the title of the person requesting the contract audit services.
- 4a-b. Enter the name, telephone number and fax number of the person to call if additional information is required.
- 5a. Enter the name of the contractor to be audited.
- 5b. Enter the solicitation or contract number assigned by your office.
- 5c-e. Show the name, telephone number, fax number and address of the person to be contacted at the contractor location.
6. Enter the number of subcontractor(s) assigned to the contract. Complete the information requested on TD F 70-06.10a for each subcontractor(s).
- 7a. Enter the type of Government contract.
- 7b. Enter the amount of the proposal or claim.
- 7c. Enter a short description of the services to be provided by the contractor.
- 7d. Enter the contract period of performance, including all option periods.
8. Show the address where the contractor's accounting records are located.
9. Indicate the type of contract audit services to be performed.
10. Indicate whether the contract action is an initial contract award, the exercise of an option under an existing contract, or a contract modification.
11. Indicate the requested audit report due date.
12. Enter the requestor's name and address to receive correspondence relating to the requested contract audit services.
13. Include a copy of the contractor/subcontractor proposal, claim, and/or the Government Technical Report, if one was prepared.
14. Provide the name and location of the cognizant audit office listed on the contractor's Standard Form 141 1, "Contract Pricing Proposal Cover Sheet".
15. Provide any special instructions and additional information relating to the requested contract audit services.